



File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319

Reset Form

Fax: 515-281-4073	DISCLOSURE	S, SEE BACK OF FORM SUMMARY PAGE		
COMMITTEE NAME (Must be	same as on Statement of Organ	nization)		
Jack Drak	le for State 1	Representative	.   [	FORM DR-2 DISCLOSURE
( 1 )Statewide/Legislative/Judge S ( 4 )County Central Committee ( 5	of committee you are reporting for: [ standing for Retention Candidate (2 ) County Candidate (6) City Candidate y PAC (9) City PAC (10) School Bo	State PAC (3)State Party ale (7)School Board or Other Politica pard or Other Political Subdivision PAC	¥ .	Rev. 07/2007) REPORT
CANDIDATE COMMITTEES (Candidate Name Jack Drak	te-	Political Party (if applicable)	L	ogged in Canned
Office Sought <u>対のはSe の子 Re</u> y	ore Sentative	District (if Senate or House)		computer
Late reports are subject to possib	ele civil and criminal penalties, Purs	suant to lowa Code sections 68B.32/	4(7) and 68	3A.401(3), the candidate, for a
Shuley Y. D. SIGNATURE OF PERSON FILE	Noke ING REPORT	<u> 7/3 -                                  </u>	> +	January 8 2009 DAYE SIGNED
	ber 31, 2008 port date)	REPORT FOR (1) ELECTION		ELECTION YEAR.
☐CHECK IF AMENDMENT TO	REPORT DATED	•		mittees, enter Date of Election
Check if this is final (terminal (You must continue to	tion) report and attach Notice of I file reports until a DR-3 is filed.)	i		ocal Committees, enter County in
				i
STATEME	NT OF CASH ON HAND			
CASH ON HAND at the beginning committee. This amou	ENT OF CASH ON HAND  ng of the reporting period. (Total  unt MUST be the same as the case  field or must be zero if this is first	sh on hand at the end	\$	8,876-63
CASH ON HAND at the beginning committee. This amount of the last reporting pe	ng of the reporting period. (Total ant MUST be the same as the car	of all funds held by the sh on hand at the end report filed.)	\$	8,876-63
CASH ON HAND at the beginnin committee. This amou of the last reporting pe ADD TOTAL MONEY	ng of the reporting period. (Total unt MUST be the same as the car riod or must be zero if this is first TAKEN IN THIS PERIOD	sh on hand at the end report filed.)	·	
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CASH ON HAND at the beginnin committee. This amout of the last reporting per ADD TOTAL MONEY Schedule A: Cash Courselve H: Loans Resident H: Total Saluschedule H: Total Saluschedule H: Schedule H: Schedule H: Schedule B: Expenditus	ng of the reporting period. (Total unt MUST be the same as the car riod or must be zero if this is first TAKEN IN THIS PERIOD intributions total (Attach Schedule F) es of Campaign Property (Attach applies to Candidates' Commit IONEY SPENT THIS PERIOD ures total (Attach Schedule B) (**	sh on hand at the end report filed.)  A) ("also see in-kind below)	\$	952.17 9 928.80 4, 242.96
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#### For instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN** 

(Including candidate's personal funds)

Reset Form

SCHEDULE MONETARY (Rev. 07/03) RECEIPTS

COMMITTEE NAME (Must be same as on Statement of Organization)

Jack Drake for State Representative

\_\_\_ CHECK THIS BOX IF AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE). LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10-29-08	ID# 9761 CK# 1008	I.W. D.A. 1511-41 & PL. Des Moines IA. 50311		\$ 100.00	
10-29-08		Alan Zell Met 56393 Highland Rd. Atlantic IA 50022		50.00	
10-30-08		Linda HartKopf 1503 Baker St. Atlantic IA. 50022		50.00	
10-30-08		Mark Markham 1501 E. 10 St. Atlantic, IA. 50022		100.00	
10-30-08		Margie Herbert 1701 E. 18# St. Unit 20 Atlantic IA. 50022		25.00	
10-30-08	ID# 9697 CK# 1056	MuniPAC 1735 NE 76 St. Ankeny IA. 50021		150.00	
10-30-08		Mary Johnson 2108- 8th Harlan, IA. 51537		25.00	
10-31-08		ROLLING H:LLS BANK BOX 588 WALNUT, IA. 51577		1.06	
11-1-08		Robert Shurp Box 249 Atlantic TA. 50022		50.00	
11-1-08	ID# CK#	Herbert Gaffigan 1222-900# St. Harlah IA. 51537		100.00	
			SUB-TOTAL		

TOTAL (if last page of this schedule)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

#### For Instructions, See Back of Form

## Reset Form

#### SCHEDULE Α MONETARY (Rev. 07/03) RECEIPTS

### CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE	NAME (Mus	t be same	e as on Sta	atement of Organization)	_
Jack	Druke	£	5+.+.	Rennesont +: Va	

CHECK THIS BOX IF AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
	ID#	Jerry Mez			INCOME
11-3-08	CK#	Jerry Mez 1523 N. Willow Avoca, IA. 51521		100.00	<u> </u>
	ID#	Michael Henningsen	<b>-</b>	700,00	
11-3-08	CK#	BOX 407		200.00	
	ID#	Atlantic IA. 50022	<u> </u>	20.00	
11-30-08	CK#	Box 588		_	
	ID#	Walnut TA. 51577		.60	ļ
12-31-08	CK#	ROLLING HILLS BANK BOX 588 Walnut, IA. 51577		,51	
	ID#	WATHUI, LA. 3/3/1	<u> </u>	•	
	CK#				
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			SUB-TOTAL	- 7- / /:	

TOTAL (if last page of this schedule)

Page of \_\_\_2 (for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consenguinity (blood relatives) and affinity (relatives by marriage) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.



FOR INSTRUCTIONS, SEE BACK OF FORM

Reset	Form

## EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	
<b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE NAME (Must be same as on Statement of Organization)

Jack Drake for State Representative

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable)	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
	AND PAC CHECK NUMBER			
	ID#	Atlantic News Telegraph	Campaign	
10-30-08	CK# 1278	410 Walnut St.	ad	\$ 3/3.11
		Atlantic, TA. 50022		\$ 3,3,,,
	ID#	Nishna Valley Shrine		
0-30-08	CK#1279	Atlantic, IA 50022	Meat	16.00
	ID#	Avoca Journal Herald	Campaign	
1-1-08	CK# /2 80	1645. ELM St.	Four ads	701.00
	10.11	A Voca, IA. 51521		, , , , , ,
	ID#	Narlan Band Parents		
1-2-08	-	Harlan, IA. 51537	Meal	18.00
	ID#	Griswoll American	Campaign	
11-3-08	CK# /282	P.O. BOX 687 Griswold IA. 51535	Two ads	27000
	ID#	Treasurer State of Lowa		
1-4-08	CK#/283	State Capitol Des Moines, IA.50319	Flag for Veterans	27.00
	ID#	Farm Buteau Spokesman	Campaign	
1-6-08	CK#1284	P.O. BOX 670 Journ Fulls, JA. 50126	Three ads	515.16
	ID#	Atlantic News Telegraph		
1-6-08	CK# / 285	410 Walnut St. Atlantic, IA. 50022	Thank you ad	99.40
			SUB-TOTAL	\$1959.67
		7	TOTAL (if last page of this schedule)	\$

TOTAL (if last page of this schedule)

### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page\_

(for Schedule B)

Reset Form

#### SCHEDULE В (Rev. 07/03)

## MONETARY **EXPENDITURES**

CHECK THIS BOX IF **AMENDING FORM** 

#### EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)

Jack	DraHe -	for State Represen	tative	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11-7-08		The Walnut Bureau 225 Antique Dr. Walnut, IA. 51577	Three ads Campaign	\$ 292.6
11-7-08		Harlan News papers 1114-74 St. Harlan, IA. 51537	Four ads Campaign	835.0C
1-8-08	ID# CK# /288	Hancock Fire Dept. Main St. Hancock, IA, 51536	Meal	15.00
11-9-08	ID# CK#/289	St. Mary catholic Chur 326 Maple Aucca, TA. 51521	ch Meal	16.00
11-12-08	ID# CK# /290	Journal Herald 164 S. Elmst. Auoca, IA. 51521	Two year Subscription	64.00
1-14-08	ID# CK# / タタ/	Danish Village Voice 4124 Main St. EIK Horn IA. 51531	Two Campaign ads Thank you ad One year Subscripto	368.00
1-16-08	ID# CK#/ <i>A9</i> 2	Earling Fire Dept. 208.12 Ave Earling, IA. 51530	Meal	17.00
1-18:08	ID# CK# <i>1293</i>	Griswold, American P.O.Box 687 Griswold, IA. 51535	Thank you ad	36.00
			SUB-TOTAL	\$1643.61
			TOTAL (if last page of this schedule)	\$

#### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

of\_

(for Schedule B)

Reset Form

### SCHEDULE

(Rev. 07/03)

MONETARY **EXPENDITURES** 

AMOUNT

**CHECK THIS BOX IF** AMENDING FORM

# EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization) Jack Drake for State Representative CANDIDATE PURPOSE

DATE EXPENDED (MM/DD/YR)	ID NUMBER (if applicable) AND PAC CHECK NUMBER	EXPENDITURE (Disbursement) WAS MADE	(DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11-23-08	ID# - CK#/294/ ID#	Marne Housing Main Street Marne, IA. 51552	Meal	\$ 15.00
12-5-08	CK#/295	Farm Buteau Spokesma P.O. BOX670 Iowa Falis, TA. 50126	n Thank you ad	176.90
12-5-08	CK# / 296	Harlan Newspaper 1114-72 St. Harlan, IA. 51537	Thank you ad	62.00
12-8-08	ID# CK# /297	Walnut Bureau 225 Antique Br. Walnut, IA. 51577	Thank you ad	30.80
12-20-08	ID# CK# /298	KJAN Radio Station North Olive St. Atlantic, IA. 50022	Christ mas ad	60.00
12-22-08	ID# CK# / 299	Jack Drake 504 Adair St. Griswold IA.51535	Campaign Cat Mileage-515 Miles Q143	221.45
12-22=8	ID# - CK# <i>j 30</i> 0	Jack Drake 504 Adair St. Griswold IA.51535	Campaign pickup To pickup signs .43	73. <b>5</b> 3
	CK#			

SUB-TOTAL

TOTAL (if last page of this schedule)

### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lower Code 68A-402(3)(i).)

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM		1
COMMITTEE NAME (Must be same as on Statement of Organization)  Jack Drake for State Representative  Reset Form	SCHEDULE  E IN-KIND (Rev. 06/97) CONTRIBUTIONS  CHECK THIS BOX IF AMENDING FORM	

DATE		200			
RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
11-3-08	Republican Party of Iowa 621 E. 9th Des Moines IA. 50309		Auto Calls Capitol Resour Inc.	* 48.72	
12-8-08	Des Moines IA. 50309 Republican Party of Iowa 621 E. 9th Des Moines, IA. 50309		Direct Mail JOK Marketing Pub.	2,743.10	
		\			
			TOTAL (if last	\$ 1,791.82 \$ 2,791.82	

"Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.